

Best Available Copy

ISSUE SLIP STATE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AS		10/22/89
O.I.P.E. CLASSIFIER		43	10/26/89
FORMALITY REVIEW		71634	11/5/89

INDEX OF CLAIMS

Rejected N
Allowed I
(Through numeral) Canceled A
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Non-elected
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Appeal
Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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